

Professional Licensing Agency
 402 West Washington Street
 Room W072
 Indianapolis, IN 46204



Eric J. Holcomb
 Governor of Indiana
Lindsay M. Hyer
 PLA Executive Director

Psychologist and Limited Psychologist Renewal

Renew online using Access Indiana Single Sign-on at MyLicense.IN.gov. To renew by mail please complete this document in its entirety and submit it with the renewal fee of \$100.00 to the office address shown above. Make check or money order payable to 'Indiana Professional Licensing Agency'. If this document is postmarked after expiration you must include a \$50 late fee. If you answer 'Yes' to questions 1-5 below send a detailed statement regarding the response with your renewal form. Please read all questions carefully as they may have changed since the previous renewal.

LICENSEE INFORMATION: Update address, if needed, and provide a current phone number and email address			
Licensee Name	License Number	Expiration Date	Renewal Fee
Street Address			
City	State	Zip Code	
Phone Number	Email Address		
QUESTIONS			
1. Since you last renewed, has any professional license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending in any state or U.S. territory?			YES NO
2. Since you last renewed, have you been denied a license, certificate, registration, or permit in any state or U.S. territory?			YES NO
3. Since you last renewed, and except for minor violations of traffic laws resulting in fines and arrests or convictions that have been expunged by a court, have you been arrested OR have you entered into a prosecutorial diversion or deferment agreement regarding any offense, misdemeanor, or felony in any state OR have you been convicted of any offense, misdemeanor, or felony in any state OR have you pled guilty to any offense, misdemeanor, or felony in any state OR have you pled <i>nolo contendere</i> to any offense, misdemeanor, or felony in any state or U.S. territory?			YES NO
4. Since you last renewed, have you had a malpractice judgment against you or settled a malpractice action?			YES NO
5. Since you last renewed, have you been denied staff membership or privileges in any hospital or health care facility or have staff membership or privileges been revoked, suspended, or subject to any restriction, probation, or other type of discipline - or have you resigned in lieu of discipline or termination?			YES NO
LICENSEE AFFIRMATION			
I hereby swear or affirm under the penalties of perjury that I understand and have met the continuing education requirements for renewal, understand the State Psychology Board statutes and rules and have answered the questions true to the best of my knowledge. <i>*Only HSPP endorsed psychologists have CE required for renewal*</i>			
Signature of Licensee		Date (month, day, year)	

For additional information, please visit us at www.in.gov/pla/.

FOR OFFICE USE ONLY		
Renewal Fee	Receipt No.	Date